

<i>SERFF Tracking Number:</i>	<i>FEMC-125852011</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>Federated Mutual Insurance Company</i>	<i>State Tracking Number:</i>	<i>40488</i>
<i>Company Tracking Number:</i>			
<i>TOI:</i>	<i>H10G Group Health - Dental</i>	<i>Sub-TOI:</i>	<i>H10G.000 Health - Dental</i>
<i>Product Name:</i>	<i>Group Dental</i>		
<i>Project Name/Number:</i>	<i>GD 03 80 (01-09 ed.)/GD 03 80 (01-09 ed.)</i>		

Filing at a Glance

Company: Federated Mutual Insurance Company

Product Name: Group Dental

TOI: H10G Group Health - Dental

Sub-TOI: H10G.000 Health - Dental

Filing Type: Form

SERFF Tr Num: FEMC-125852011 State: ArkansasLH

SERFF Status: Closed

Co Tr Num:

Co Status:

Author: Jeanette Myers

Date Submitted: 10/09/2008

State Tr Num: 40488

State Status: Approved-Closed

Reviewer(s): Rosalind Minor

Disposition Date: 10/09/2008

Disposition Status: Approved-Closed

Implementation Date Requested: 01/01/2009

Implementation Date:

State Filing Description:

General Information

Project Name: GD 03 80 (01-09 ed.)

Project Number: GD 03 80 (01-09 ed.)

Requested Filing Mode: Review & Approval

Explanation for Combination/Other:

Submission Type: New Submission

Overall Rate Impact:

Filing Status Changed: 10/09/2008

State Status Changed: 10/09/2008

Corresponding Filing Tracking Number:

Filing Description:

Status of Filing in Domicile: Pending

Date Approved in Domicile:

Domicile Status Comments:

Market Type: Group

Group Market Size: Small and Large

Group Market Type: Discretionary, Trust

Deemer Date:

Federated Mutual Insurance Company is submitting a revised rider to be used with our group dental product.

Rider GD 03 80 (01-09 ed.) will replace GD 03 80 (01-02 ed.) approved on 9/24/2002. This rider amends the definition of dependent and the only change is to the dependent limiting age. A dependent can remain insured under the group policy until age 25 or as long as full-time student status is maintained.

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 Product Name: *Group Dental*
 Project Name/Number: *GD 03 80 (01-09 ed.)/GD 03 80 (01-09 ed.)*

Company and Contact

Filing Contact Information

Jeanette Myers, Compliance Analyst jmmyers@fedins.com
 121 East Park Square (800) 533-0472 [Phone]
 Owatonna, MN 55060 (507) 455-8226[FAX]

Filing Company Information

Federated Mutual Insurance Company	CoCode: 13935	State of Domicile: Minnesota
121 East Park Square	Group Code: 7	Company Type:
PO Box 328		
Owatonna, MN 55060	Group Name:	State ID Number:
(800) 533-0472 ext. [Phone]	FEIN Number: 41-0417460	

Filing Fees

Fee Required? Yes
 Fee Amount: \$75.00
 Retaliatory? Yes
 Fee Explanation: MN fee is \$75 per form filing.
 Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Federated Mutual Insurance Company	\$75.00	10/09/2008	23076517

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved-Closed	Rosalind Minor	10/09/2008	10/09/2008

Amendments

Item	Schedule	Created By	Created On	Date Submitted
Certification	Supporting Document	Jeanette Myers	10/09/2008	10/09/2008

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Disposition

Disposition Date: 10/09/2008

Implementation Date:

Status: Approved-Closed

Comment:

Rate data does NOT apply to filing.

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Item Type	Item Name	Item Status	Public Access
Supporting Document	Certification/Notice	Approved-Closed	Yes
Supporting Document	Application	Approved-Closed	Yes
Supporting Document	Certification	Approved-Closed	Yes
Form	Group Dental Rider	Approved-Closed	Yes

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Amendment Letter

Amendment Date:

Submitted Date: 10/09/2008

Comments:

I forgot to include the Rule and Regulation 19 Certification.

Changed Items:

Supporting Document Schedule Item Changes:

User Added -Name: Certification

Comment: I forgot to include the Rule and Regulation 19 Certification.

Rule 19 Cert_Health.pdf

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Form Schedule

Lead Form Number: GD 03 80 (01-09 ed.)

Review Status	Form Number	Form Type	Form Name	Action	Action Specific Data	Readability	Attachment
Approved-Closed	GD 03 80 (01-09 ed.)	Certificate Amendment, Insert Page, Endorsement or Rider	Group Dental Rider	Revised	Replaced Form #: GD 03 80 (01-02 ed.) Previous Filing #: GD 00 11 (01-02 ed.)		GD 03 80 _01-09 ed.__.pdf

**FEDERATED MUTUAL
INSURANCE COMPANY**
HOME OFFICE: 121 East Park Square, Owatonna, Minnesota 55060

GROUP DENTAL POLICY AND CERTIFICATE RIDER

POLICY NUMBER: [0000]
RIDER EFFECTIVE DATE: [January 1, 2009]

The **policy** and certificate are changed as follows for residents of Arkansas:

Section VIII - Definitions, 25 **Dependent or Dependents**, is deleted and replaced with the following:

25. Dependent or Dependents

means the persons shown below. A person who is a **covered employee** is not eligible as a **dependent** under any policy issued by **us**. No one can be considered a **dependent** of more than one **covered employee** under any policy issued by **us**. If both **spouses** are covered as **covered employees** under any **policy** issued by **us**, only one **spouse** shall be considered to have any eligible **dependents**.

- a. **Spouse.** This is a **covered employee's** current legal **spouse**.
- b. **Child.** This is a **covered employee's**:
 - i. unmarried natural or legally adopted child;
 - ii. unmarried child for whom the **covered employee** or his **spouse** is the legal guardian;
 - iii. unmarried step-child living with the **covered employee**; or
 - iv. a child covered under a valid qualified medical child support order (as the term is defined under Section 609 of the Employee Retirement Income Security Act (ERISA) and its implementing regulations) which is enforceable against a **covered employee**.

In each case the child must be unmarried and less than 25 years old or a disabled **dependent**, as described below. Coverage will be continued to the end of the **calendar year** in which the child marries or reaches the age of 25. Coverage will also be continued beyond age 25 for an unmarried child who is a student in an accredited institution of postsecondary education as long as full-time student status is maintained.

- c. **Disabled Dependent.** This is a **covered employee's** child who is beyond the limiting age and physically handicapped or mentally disabled, and obtains the majority of his financial support from the **covered employee**. The disability must have come into existence prior to age 25. Disability does not include pregnancy. "Disabled" means incapable of self-sustaining employment by reason of mental retardation, mental illness, or physical handicap. At **our** request and **our** expense, the **covered employee** must give **us** proof of the **dependent's** disability. **We** reserve the right to periodically review the disability. After the first two years, **we** will not review the disability more frequently than once every **calendar year**.

President

Secretary

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Rate Information

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Supporting Document Schedules

Satisfied -Name:	Certification/Notice	Review Status:	Approved-Closed	10/09/2008
Comments:				
Attachment:				
	Flesch Score Certification_Dental.pdf			

Bypassed -Name:	Application	Review Status:	Approved-Closed	10/09/2008
Bypass Reason:	N/A			
Comments:				

Satisfied -Name:	Certification	Review Status:	Approved-Closed	10/09/2008
Comments:	I forgot to include the Rule and Regulation 19 Certification.			
Attachment:				
	Rule 19 Cert_Health.pdf			



121 East Park Square
P.O. Box 328 • Owatonna, MN 55060
Phone: (507) 455-5200 • 800-533-0472

FEDERATED MUTUAL INSURANCE COMPANY

Owatonna, Minnesota

CERTIFICATE OF COMPLIANCE

STATE OF ARKANSAS

GD 03 11 (01-02 ed.)

To the best of my knowledge and belief, these forms meet the Flesch minimum reading ease score required by the state of Arkansas.

Timothy G Luy Vice President

October 9, 2008



121 East Park Square
P.O. Box 328 • Owatonna, MN 55060
Phone: (507) 455-5200 • 800-533-0472

STATE OF ARKANSAS

CERTIFICATION OF COMPLIANCE

FEDERATED MUTUAL INSURANCE COMPANY

I hereby certify that Federated Mutual Insurance Company meets the provisions set forth in Rule and Regulation 19 as well as all applicable requirements of the Arkansas Department of Insurance.

Signature of Officer

Timothy G. Luy
Name

Vice President
Title and/or Business Affiliation

October 9, 2008
Date